Utah Department of Human Services Child and Family Services



ANNUAL REPORT 2008

Jon M. Huntsman, Jr., Governor Lisa-Michele Church, Executive Director, Department of Human Services Duane E. Betournay, Director, Division of Child and Family Services

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The children pictured throughout the annual report are youth featured in Utah's adoption Heart Gallery. The Heart Gallery is an event in which youth, who are orphans of the State, are photographed by professional photographers who generously donate their talents, materials, and time to capture the individual personality of each young person. The portraits then become part of a traveling exhibit designed to heighten awareness of the need to find families for our community's forgotten children – older youth and sibling groups without permanent families.

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Director's Message

We are pleased to present you with the Fiscal Year 2008 (FY08) Division of Child and Family Services' Annual Report. The past year has been one of challenges and triumphs. During these difficult economic times, Child and Family Services is working continuously to improve efficiency while maintaining our ability to provide services to those in need at the same high level of quality. On the

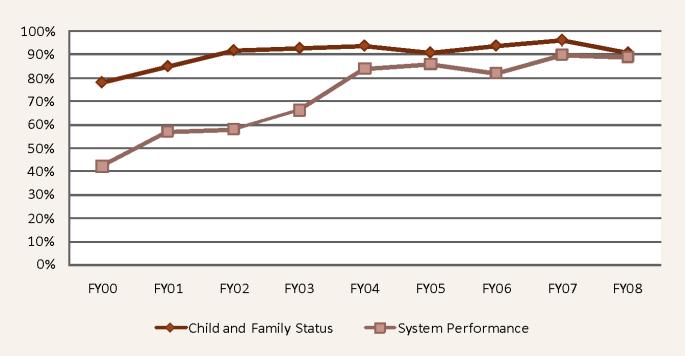
positive side, after many years of hard work, the Federal Court, at the recommendation of the National Center for Youth Law (NCYL), dismissed the legal case and settlement that Utah has been operating under since 1994. In a letter to Governor Huntsman, the NCYL director noted that Utah has "one of the best" child welfare systems in the country. He stated, "We all should have great pride in what the Utah foster care system has become." The success of our system has come from recognizing areas where we can continually work toward improvement with the partnership of the community and families that we serve, and then actively working internally and with our partners to put those improvements in place. In the spirit of continual betterment we have not only provided information about our service programs in this annual report, but also information regarding the outcomes of those programs and the initiatives for each area where we are working toward amelioration of the outcomes. We have made a commitment of transparency, making information about our work available to the general public and our community partners on an on-going basis through our website. We post a number of reports and review findings regularly on this site as well as our Practice Guidelines. We hope you will use these resources to keep informed about the work we do. The website is www.dcfs.utah.gov.

During this past year the Utah State Legislature passed a law that enables us to more quickly place children with appropriate relatives while they are becoming licensed. With the passage of the law Child and Family Services moved to write Practice Guidelines, develop training, and then train our employees on how to best use the new processes to help children and families. Connections to partner agencies such as Department of Workforce Services, that administers the Specified Relative Grant, were made in order to streamline the processes that relatives were required to take. We also partnered with the Office of Licensing, that administers foster care licenses. We continue to work on this initiative to assure that all workers know and follow the protocol.

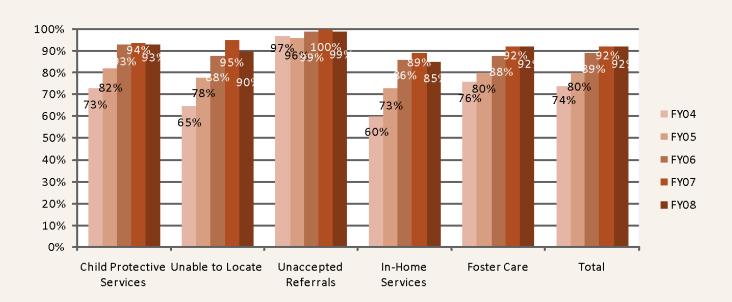
Child and Family Services is committed to using intervention techniques that involve, engage, and empower the family whenever possible. We use a family team approach where the family identifies people in their lives who they go to for support and encouragement. These informal supports along with the professionals working with the child and family such as the therapist, school teacher, and caseworker, come together as a team to help the family achieve the goals necessary to ensure enduring safety and permanency for the child. Our programs have proven successful outcomes through our annual Qualitative Case Reviews, Case Process Review, and our performance outcomes data that we regularly review. The Qualitative Case Review measures outcomes for children and families while the Case Process Review measures compliance with Practice Guidelines. Below are data showing the results of both of these reviews over the past five years.

You have our assurance that we will continue to provide these high quality services while remaining fiscally responsible.

QUALITATIVE CASE REVIEW



CASE PROCESS REVIEW





Child Protective Services

The Child Protective Services (CPS) program responds to calls from the community concerning potential abuse, neglect, or dependency of children. When CPS workers respond to these concerns they assess the situation using the Safety Decision-Making Model. This model directs workers to evaluate (1) threats of harm, which are specific and observable conditions in the child's environment, (2) child vulnerability, which is the degree to which a child is susceptible to the impacts of specific threats of harm, and (3) protective capacity, which consists of the characteristics or resources of the parent and/or caregiver that directly manage identified threats of harm or serious threats of harm. Based upon the information gathered as part of this assessment, a determination is made whether or not additional intervention is required to create safety. Interventions may

include CPS workers providing educational information, referring to community services, Child and Family Services' In-Home Services, or, if the child cannot be maintained safely in the home, placement into protective custody.

CPS investigated 19,878 cases in FY08. Of those, 8,284 (42 percent) were supported.

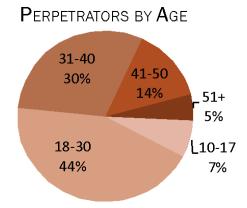
Number of CPS Cases Investigated



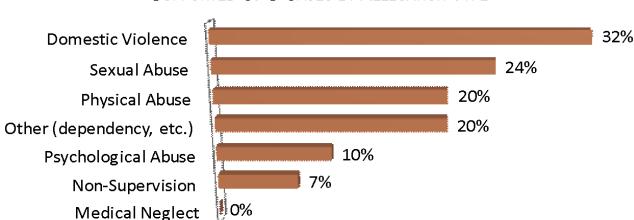
Of the total abused and neglected children in FY08, 53 percent were female and 47 percent were male. Children aged zero to five years comprise 42 percent of all supported victims, and adults aged 18 to 30 years comprise 44 percent of supported perpetrators.

VICTIMS BY AGE

14-17
17%
0-5
42%
6-10
27%



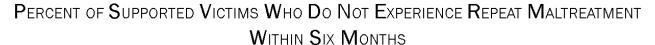
Domestic violence related child abuse is the most frequently supported allegation. Sexual abuse is the second most supported allegation. For definitions of allegations see the Definitions section of Practice Guidelines at http://www.hspolicy.utah.gov/dcfs/. Note that one case may have more than one supported allegation; therefore, the percentages in the chart below add up to more than 100 percent. Additionally, 30 percent of supported abuse or neglect cases had alcohol or drug abuse as a contributing factor as reported by caseworkers.

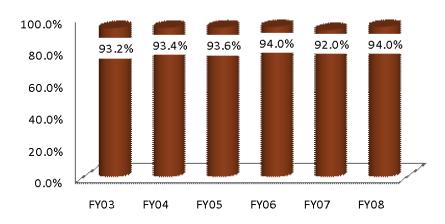


Supported CPS Cases by Allegation Type

Outcomes:

CPS cases are family based; consequently, one case may have more than one victim. There were 12,571 supported victims on the 8,284 supported cases. Of those, 81 percent were referred to the community for services, 15 percent received subsequent In-Home Services, and 9 percent received subsequent foster care services from Child and FamilyServices. The main goal of CPS is to prevent children from being reabused. The chart below shows the percent of children who do not have reports of repeat maltreatment within six months of the close of the case. Child and Family Services monitors reports of reabuse within six months to be consistent with federal monitoring in this area.





Initiatives:

CPS will continue to work in the next year toward consistent implementation of the Safety Decision-Making Model and monitoring appropriate intervention decisions with the goal of continuing to reduce repeat maltreatment.

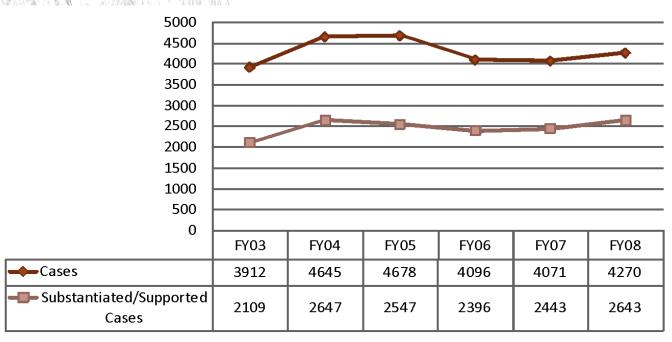


Domestic Violence Services

Child and Family Services serves children and families impacted by domestic violence through CPS assessments of domestic violence related child abuse and provides a variety of services related to domestic violence.

Utah is one of only five states in the nation where domestic violence in the presence of a child is recognized as child abuse. Thirty-two percent of all supported CPS investigations include incidents of domestic violence.

Number of Domestic Violence Related Child Abuse Cases



The data below represent domestic violence victims (men, women, and children) whose shelter episode closed during FY08. The data collected on domestic violence shelter clients are not identified due to federal restrictions. Because clients may enter the same shelter or different shelters during the time period, the client counts are considered duplicated (the same person may be counted more than once).

Domestic Violence Shelter Clients and Days in Shelter - FY08

Fiscal Year	Clients	Days
FY06	3,556	67,261
FY07	3,400	72,304
FY08	3,370	77,918

A shelter episode represents a stay in the shelter by one or more victims of the same family. Clients may stay at shelters for multiple types of abuse. The most frequently reported abuse type is verbal abuse, followed by psychological violence, physical violence, and threats of violence.

Domestic Violence Shelter Episodes - Types of Abuse FY08

Type of Abuse	Episodes	Percent
Not reported	77	1%
Violation of Protective Order	178	1%
Physical Violence with weapon	384	3%
Threat of Violence with weapon	428	3%
Stalking	580	4%
Sexual Violence	649	5%
Threat of Suicide/Homicide	717	5%
Destruction of Property	819	6%
Threat of Violence	2,188	16%
Physical Violence	2,416	18%
Psychological Violence	2,497	18%
Verbal Violence	2,840	21%
Total Number of Episodes	1,750	

Services offered in Utah to address domestic violence include: shelter, safety planning, community resource education, assistance in acquiring a protective order, community education, perpetrator treatment referral, law enforcement referral, individual and group counseling, and day care. The table below shows the services provided to shelter victims last year. In addition to providing shelter for victims, a number of other services are provided.

Domestic Violence Shelter Episodes - Services Provided - FY08

Services Provided	Episodes	Services	Percent
Perpetrator Treatment Referral	211	365	1%
Child Care (Day Care)	940	1,503	3%
Crime Victim Reparations	1,127	1,567	3%
Child Protective Services Referral	1,319	2,009	4%
Law Enforcement Referral	1,159	1,633	4%
Health Services Referral	1,750	2,271	5%
Legal Services Referral	1,654	2,302	5%
Protective Order	1,750	2,403	5%
Mental Health Services Referral	2,047	2,644	6%
Transportation	3,384	2,988	7%
Workforce Services Referral	2,891	3,788	8%
Housing Advocacy	3,221	4,199	9%
Group Counseling/Support Group	3,365	4,357	10%
Safety Planning	4,939	6,436	14%
Individual Casework	5,187	6,619	15%
Total	1,750	45,084	



Outcomes:

The goal of domestic violence interventions is to reduce reabuse of victims. The chart below shows the percent of child victims of domestic violence related child abuse that had a second domestic violence related abuse incident with the same perpetrator within 12 months. Note that this data cannot be compared to the CPS recidivism data as it is looking at only one type of allegation, with the same perpetrator, and the timeframe for tracking is different.

RECIDIVISM OF DOMESTIC VIOLENCE RELATED CHILD ABUSE

Fiscal Year	Percent with a subsequent case
FY04	6.14%
FY05	6.44%
FY06	5.76%
FY07	5.58%
FY08	6.69%

Federal restrictions do not allow the ability to track individual indentifiable data in shelters for reasons of confidentiality; therefore, data concerning recidivism of shelter victims or domestic violence perpetrators is not available.

Initiatives:

Standardizing reporting for domestic violence services providers and Child and Family Services is an initiative for the coming year. Specifically, the focus is on ways that shelters and providers can improve the documentation and service delivery for clients. Currently, shelters do not have a standardized method of documenting services provided to clients. By standardizing documentation, more accurate data and better services can be provided to clients. Providing standardization of Advance Domestic Violence Practice Model Training across the State is also a priority for the coming year.

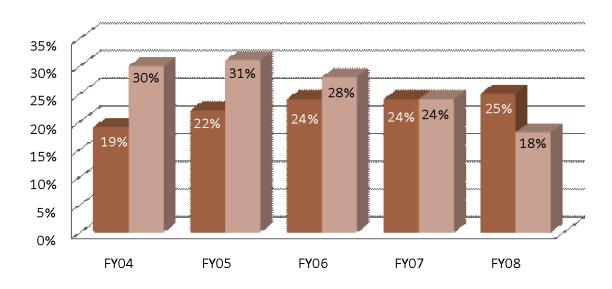
The domestic violence services community is also working on the introduction of a marriage license bill that would increase the cost of marriage licenses with the additional revenue going to helters. Funding for shelters has not been increased for a number of years.

Kinship Care

Child and Family Services' first priority is to maintain children at home with their family, if they are able to do so safely. If a child cannot safely remain at home the next best option is placement in the home of someone familiar – a kinship caregiver. Kinship caregivers are preferred placements for children due to their knowledge of and relationship with the family and child. Because of their personal attachment to the child, kinship caregivers are generally willing to provide a permanent home for children who are unable to return home.

When kinship caregivers are identified, Child and Family Services will conduct an assessment to determine the ability and willingness of the kinship caregivers to promote safety, well-being, stability, and permanency for the child. When children are placed with a kinship caregiver the relative can become a licensed foster care provider in order to get extra supports and services and custody of the child remains with the State (i.e., the child remains in foster care). Custody can also be given to the relative with the court often ordering Child and Family Services' In-Home Services. Child and Family Services encourages kinship caregivers to become licensed foster parents so that they will have the extra supports they need as they begin to care for the child. The graph below shows the percent of children served in In-Home Services that are placed with kin and the percent of foster care children that are placed with kin. More kinship caregivers are choosing to become licensed foster parents for a time.

Percent of Children in Foster Care Placed with Kinship Caregivers and Percent of Children Receiving In-Home Services in the Custody of a Kinship Caregivers



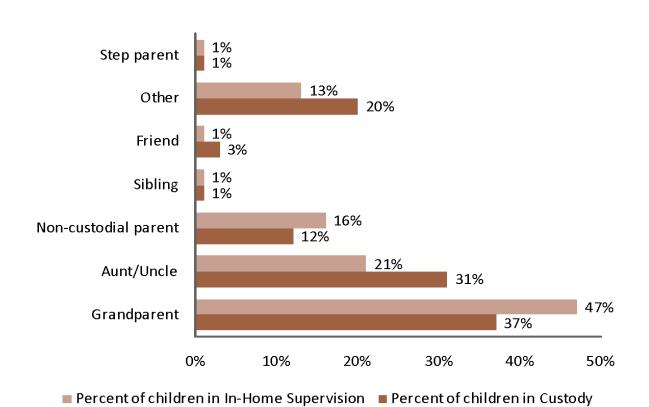
- Percent of Children in foster care placed with kinship caregivers
- Percent of Children receiving In-Home Services in the custody of kinship caregivers



Kinship caregivers may be a child's grandparents, aunts, uncles, brothers-in-law, sisters-in-law, stepparents, first cousins, stepsiblings, or siblings. For an Indian child, relatives are defined by the Indian Child Welfare Act.

Grandparents are the kinship caregivers that children are most frequently placed with, followed by aunts and uncles.

Relationship of Kinship Caregiver to the Child For Children in Custody and Children in the Custory of the Relative



Outcomes:

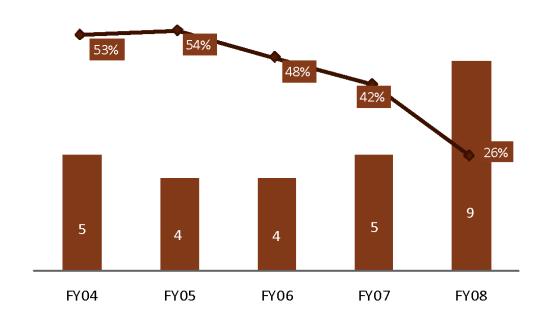
The final permanency plan for the child may be to reunify the child and the parent, request the court to grant permanent custody and guardianship to the kinship caregiver, or file for termination of parental rights and work toward adoption of the child with the kinship caregiver or another permanent family. In FY08, 13 percent of children were placed into the permanent custody of kin, and of all children adopted 21 percent were adopted by kin. In 2004, Child and Family Services noticed that a large percentage of children who re-entered foster care had been previously discharged to relatives.

Child and Family Services began an initiative to lower re-entry from children placed in the custody of relatives. The strategy was to spend more time at the beginning of the case working with the kin, ensuring that they had the services and supports they needed to care for the child, and helping them understand the long-term commitment they were being asked to make. Because of this initiative, children spent slightly longer amounts of time in custody; however, more children achieved lasting stability as can be seen by the reduction in the rate of children re-entering custody within 12 months from kinship caregivers.

Percentage of Children Re-entering Foster Care Who Were Previously

Discharged to a Relative and

Average Number of Months in Custody Who Exit to a Relative



Initiatives:

Last year legislation allowed Child and Family Services to place children with relatives prior to their licensure as resource foster families allowing us to place with kin more quickly. A major initiave was launched to define this practice and train workers. In the coming year, follow up will be conducted to determine if activities to identify, find, and support kinship placement have been incorporated into practice. New federal legislation emphasizes the importance of identifying and locating non-custodial parents and assessing them as the first placement option for children. It also requires notification of both maternal and paternal relatives when a child is placed in State custody. These two new requirements will be incorporated into practice during the next year.



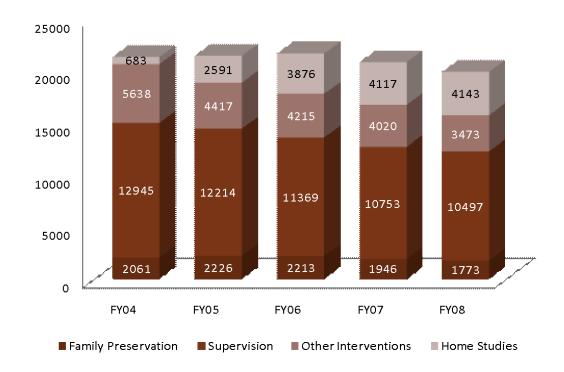
In-Home Services

In-Home Services are provided in the family's home. These services are designed to reduce threats of harm to the children and increase the protective capacities of the caregivers. In-Home Services are typically provided to families after an allegation of child abuse or neglect is supported and may be used to prevent a child from being removed from the home. In-Home Services are also used to increase family functioning as a child is reunified with his or her family after a foster care placement. In-Home Services may include counseling, advocacy, peer parenting, parent education, and parenting skills

building. These services may be voluntary or court ordered. The intensity of the services delivered is dependent on the need of the family.

The chart below shows the number of adult and child clients served through various types of In-Home Services. Family Preservation Services are services available to families that are in crisis and are in need of more intensive services to help safely maintain a child at serious risk of being removed from his/her home or from the home of a relative with legal custody. A worker is available to the family 24 hours a day. The intervention typically lasts from 60 to 90 days. Supervision Services are less intensive home-based services where abuse or neglect is a concern. Other interventions may include counseling or home-based interventions where abuse/neglect is not a concern. Home studies may be court-ordered prior to providing services, or prior to placing a child with a prospective caregiver.

Number of Clients Served Through In-Home Services by Service Type

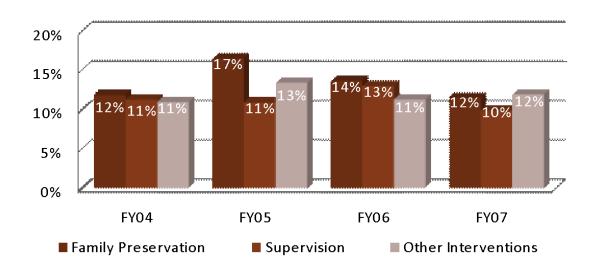


Outcomes:

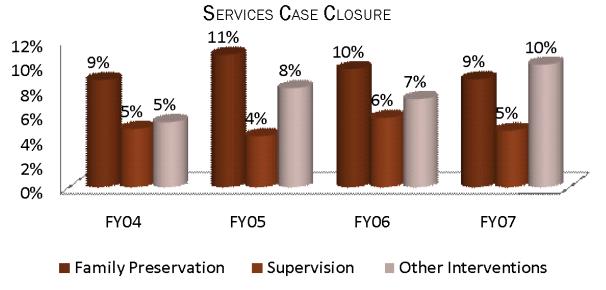
The purpose of In-Home Services is to prevent subsequent abuse or neglect, to prevent the need for children to enter State custody, and to improve the stability of the home situation. One of the outcome measures used for In-Home Services is assessing the presence of abuse, neglect, or dependency following the closure of In-Home Services. Another measure is the percent of children who enter foster care following an In-Home Services case closure. The two charts below show these measures by service type.

Percent of Children With a Supported Allegation of Abuse or Neglect Within 12

Months of an In-Home Services Case Closure



Percent of Children Entering Foster Care Within ${\bf 12}\ M$ onths of an In-Home



Initiatives:

An In-Home Services workgroup is currently looking at the variety of and need for In-Home Services provided statewide. Need for services may vary depending on what is available in the community. The In-Home Services workgroup is working to define what services Child and Family Services has the responsibility and capacity to provide. Child and Family Services, is working on enhancing the Peer Parenting program in the state and incorporating a more researched based model into practice in order to serve more families.

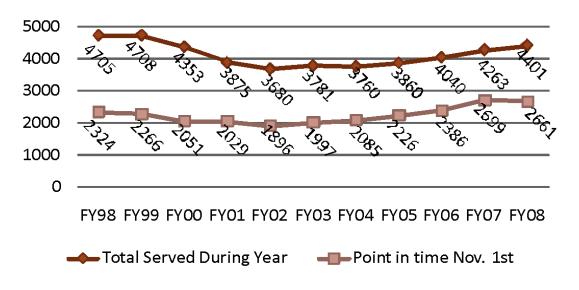


Foster Care

When a child is unable to remain safely in the home of their parent or caregiver, juvenile court may order custody and/or guardianship of the child to Child and Family Services, which is commonly referred to as "foster care." The purpose of foster care is to provide a safe environment where the child can reside while services are provided to the child and family. If the child is unable to return to a parent or caregiver, Child and Family Services focuses on building connections for the child with another family that will be their permanent home. Permanency for the child can be achieved through guardianship with a relative or adoption.

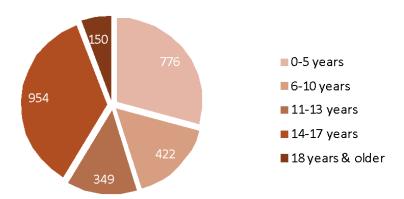
The chart below shows the number of children typically in custody at any point in time (bottom line), as well as the total number of children served in foster care at any time during the year (top line).

Number of Children Receiving Services Point-in-time and Total Served



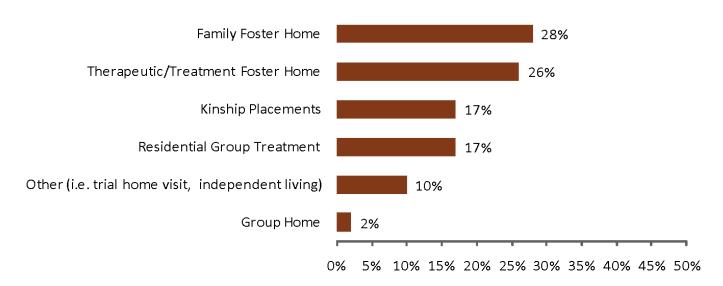
Most children in custody are between the ages of 14 and 17 and zero to five years.

CHILDREN IN FOSTER CARE BY AGE POINT-IN-TIME



When children are placed in foster care an effort is made to place them in the least restrictive placement to meet their needs. The chart below shows the placement structure of children in custody.





Outcomes:

Once children are placed into custody for their safety, the goal of Child and Family Services becomes reunifying the child with their parents, or if that is not possible placement in another permanent home. Child and Family Services attempts to balance finding a permanent placement quickly, with reducing the likelihood that the child will re-enter custody. The table below shows the disposition of children at the closure of foster care cases in the past year and the length of time, on average, they were in custody.

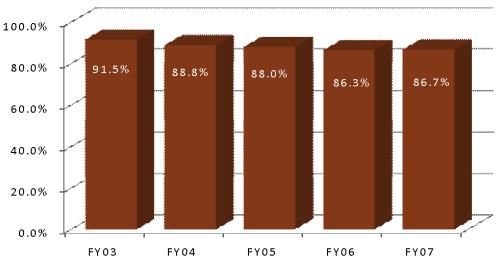
Reason for Exiting	Percent	Average Months in Custody
Adoption Final	25.24%	17
Age of Majority/ Emancipation	12.39%	39
Child Ran Away	2.84%	20
Custody to Juvenile Justice Services	3.30%	16
Custody/Guardianship to Foster Parent/Other Nonrelative	1.76%	15
Death of Child	0.06%	17
Custody and Guardianship to Relative	13.00%	9
Referred Outside Organization	1.02%	20
Reunification with Parent(s)/ Primary Caregiver(s)	41.00%	10

One of the goals within the foster care program is for children to experience as few placements as necessary to meet their needs. It is essential for children to have as much stability as possible in their living situation for optimal development. In FY08, 71 percent of children in care less than 12 months had two or fewer placements. For children exiting custody during FY08, the average number of placements children experiences while in custody was three.



Less than 15 percent of children re-enter custody within 12 months. Child and Family Services will be working to reduce this percentage.

Percent of Children Exiting Custody without a Subsequent Custody Episode Within 12 Months.



Initiatives:

In the next year, Child and Family Services will be working to improve educational outcomes for children in care. Educational initiatives include working with our partners in education to allow children to remain in their home schools, as well as normalizing the educational experience for children in care. Child and Family Services will also continue to work with education to ensure that children in foster care receive an appropriate education.

Work will also continue to be done to address placement stability for children in care, which includes reducing the number of placements children experience while in foster care. Child and Family Services will continue to work on reducing the number of children placed in short term "shelter" care facilities, and instead place them directly into family based homes. Placement stability initiatives also include: finding ways to reduce the number of children that re-enter foster care within 12 months, building capacity to better train and support foster parents in caring for children, and increasing support for kinship caregivers who have children placed with them by Child and Family Services. Additionally, Child and Family Services is reviewing and revising the use of utilization committees, who monitor the placement of children in residential and/or group facilities.

Child and Family Services is also working on ways to improve how we provide permanency for the children we serve. Permanency includes providing a safe and stable home, promoting enduring relationships that will provide stability and familiarity to the child, and assisting the child in maintaining a connection to their identity. Initiatives in this area include developing training for staff and partners as well as raising awareness about the importance of permanency in the lives of all the children we serve.

Transition to Adult Living

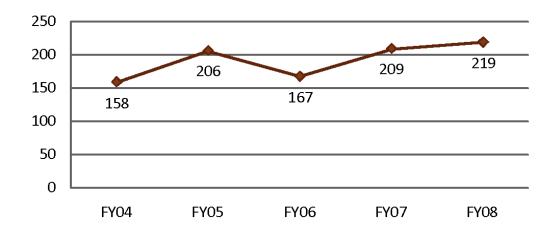
Transition to Adult Living (TAL) is a continuum of services and supports provided to all young people age 14 years and older in the care of Child and Family Services. Youth are offered TAL services regardless of their permanency goal. TAL services prepare young people to meet the challenges of transitioning to adulthood in accordance with Federal Chafee Foster Care Independence Program requirements. The chart below shows the number of youth served in foster care that were 14 and older during the prior five years. Although the number of children continues to increase, the percentage of children served that are 14 years and older has remained consistent at 40-41 percent of all children in foster care.

Number of Youth Served

Year	Number of Children 14 and older	Percent
FY 04	1547	41%
FY 05	1586	41%
FY06	1651	41%
FY 07	1685	40%
FY08	1765	41%

TAL services are aimed at helping youth in foster care to achieve five fundamental aspects of adult life: supportive and enduring relationships, positive sense of self, educational attainment and stable employment, health care access, and safe and affordable housing. Basic living skills training is offered to each youth in care when they reach age 16 years. TAL services continue after young people exit care through the Young Adult Resource Network (YARN). The YARN provides resources that support youth in the areas of information and referral, personal support during transition, help establishing and maintaining living arrangements, providing peer support opportunities, and temporary financial assistance. The graph below shows the number of youth who are released from State custody because they have reached adulthood. Youth can remain in foster care up to age 21 years but most leave soon after their 18th birthday or high school graduation. Emancipation from Child and Family Services custody occurs when a child 18 years or older is released from the custody of the State or any other quardian.

Number of Youth Emancipating Each Year



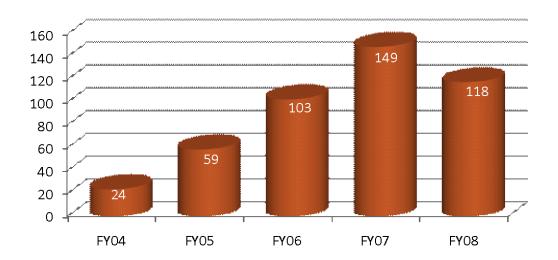


Outcomes:

The goals of the TAL program are to help youth succeed in the five fundamental aspects of adult life. It is often difficult to locate children after they have left custody in order to assess outcomes. Child and Family Services is currently working to gather information regarding the status of youth who have aged out of foster care since 1999. It is anticipated the information from this will be available summer 2009.

One outcome Child and Family Services does regularly track is the receipt of educational training vouchers by children who have exited custody.

Number of Youth Receiving Educational Vouchers Each Year



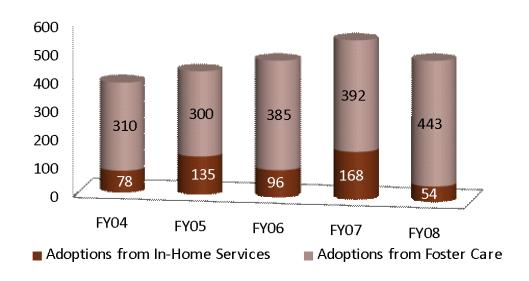
Initiatives:

Because outcomes have been so difficult to assess in the past, one of the current initiatives in the TAL area is improving the tracking of both TAL services delivered while children are in care, as well as their status after leaving care. In February 2008, the Federal Government posted a final rule directing states to develop methods to collect and report information regarding TAL services delivered to youth and their status at ages 17, 19, and 21 years via a survey. The information collected via these methods will become part of a National Youth Transition Database (NYTD). Child and Family Services is currently working to create ways to track services in the management information system and improve connections with youth once they leave care using email, social networking, and texting in order to be able to survey them after they have exited custody.

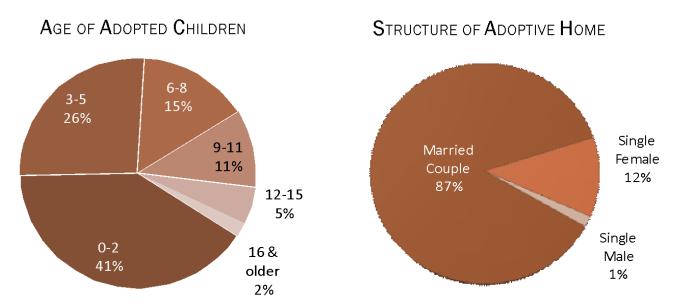
Adoption

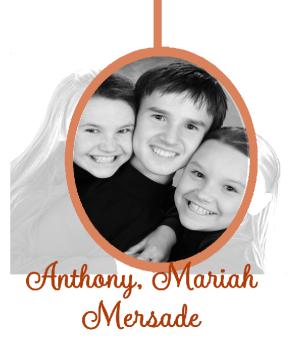
Child and Family Services strives to assure that all children have permanent families in which to grow; families that will provide safety, guidance, and nurturing. If a child cannot be safely raised by their biological parents, every effort is made to find a relative to parent the child. If a relative is not available, preference is given to the child's foster family.

Number of Children Adopted



Children can be adopted at any age. Most adoptions in Utah are of children age zero to five years. Older youth and sibling groups often wait years in foster care for a family to call their own. Utah recruits adoptive families specifically for older youth through the Heart Gallery, Wednesday's Child, and other events. The Adoption Exchange sponsors the Heart Gallery and arranges locations to display the photographs in an effort to increase public awareness of Utah's children who wait for an adoptive family.





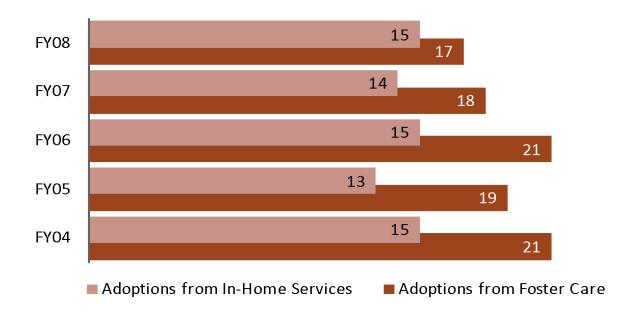
Child and Family Services offers supportive services for families who adopt older youth or children with special needs. Post adoption workers specialize in adoption related issues and resources.

Community services are listed through the Adoption Connection website, newsletter, and booklet. Medical assistance and financial support may be available for families who adopt children in foster care.

Outcomes:

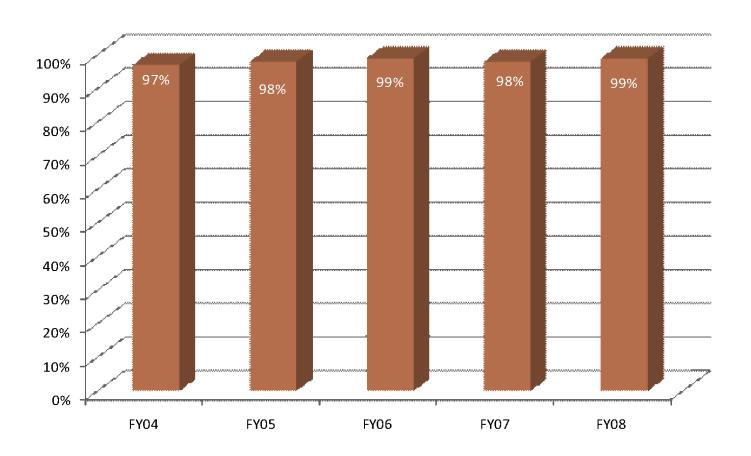
Nationally much attention has been placed on reducing the amount of time it takes children in foster care to be adopted. The median length of stay in months for children to be adopted nationally was last reported at 31.5 months. In Utah the median months for children to be adopted FY08 was 14. The chart below show the average months it takes for children to be adopted from both In-Home and foster care services.

AVERAGE MONTHS CASES ARE OPEN PRIOR TO ADOPTION



Child and Family Services also strives to match children successfully with adoptive homes. The chart below shows the percentage of adoption placements that do not disrupt prior to finalization.

Percentage of Children Without an Adoption Placement Disruption



Initiatives:

Permanent families for all children exiting foster care is a goal for Child and Family Services. Heart Gallery portraits of Utah children will travel to sites around the State to promote public awareness of the need for adoptive families for teenage youth orphaned in foster care. An adoption conference for parents and professionals will highlight ways adoptive parents can better deal with challenges within their family and national research on transracial adoption will be presented. An interagency audit of hundreds of adoption assistance files will be carried out to ensure program quality. In 2008, research was conducted to assess the usefulness and availability of resources for adoptive families in Utah. Based on the research findings, post adoption services will be identified for improvement. Agency efforts will also focus on maintaining current services for post adoption in light of budget cuts.



Training

Child and Family Services provides a variety of training opportunities for our staff as well as the broader public. We believe that it is vital that our new employees have a substantial amount of training before they assume a caseload and have responsibility for children and families.

New caseworkers receive the following training before carrying a full caseload:

- Department of Human Services New Employee training.
- 120 hours of Practice Model training The philosophy and foundation for work with families. It is also intended to provide consistent practice across the state.
- SAFE training Instruction of using Utah's statewide automated child welfare information system, which is the casemangagement system.
- Level A The introduction to the Department and Child and Family Services processes.
- Level B The organization for practice and documentation training.
- CORE 100 An overview of the laws and legal processes.
- CORE 103 An overview of the effects of abuse and neglect on child development.
- CORE 104 An overview of the issues of assicuated with separation and loss for children and families.

Region	Number of New Employees Trained	Number of Trainers
Salt Lake	68	5
Northern	34	3
Western	29	2
Eastern	35	2
Southwest	22	2
State Office		6

New employees at the State Office receive training in the regions. Trainers at the State Office are curriculum developers.

All of our staff are required to have regular training on:

- WorkplaceViolence
- Sexual Harassment
- Driver Safety

New support staff are also required to have a less intense training on the Practice Model.

Veteran casework staff are required to have 40 hours of inservice training each year. This is also a requirement for their licensure. There are various trainings the regions provided throughout the year. The topics can range from domestic violence, to child development, to youth safety, to substance abuse issues, and others.

We also host a child welfare institute each year for all staff. This year, we brought in a nationally renowned speaker, Dr. Bruce Perry to inform about trauma and the effects on the brain. Four hundred people attended this daylong event. This included Child and Family Services staff, partner agency staff, foster parents, and others.

Some of the other public events in 2008 that Child and Family Services staff attended were:

- The National Drug Endangered Children's conference
- The Joining Forces Conference
- The Court Improvement Summit
- The Quality Improvement Summit
- The Troubled Youth Conference
- The Children's Justice Center Symposium

Training	Number
Training	Trained
Advanced Intensive Sex Abuse Interview Skills	99
Audio-Import	176
C.A.R.E.	72
Car Seat	14
Child Interviewing	105
Clinical Forum	58
Domestic Violence	399
Home Builders Family Preservation	117
Kinship Practice Guidelines 2008	829
Legal – 4 th & 14 th Amendments	165
Legislative Update	196
Licensing Information System	22
Limelight Training	21
Motivational Interviewing	130
Safety Model Introduction	665
Secondary Traumatic Stress	67
Substance Abuse – Web	377
Transfer to Adult Learning – Ansell Casey Learning Skills Assessment	298



Cultural Diversity

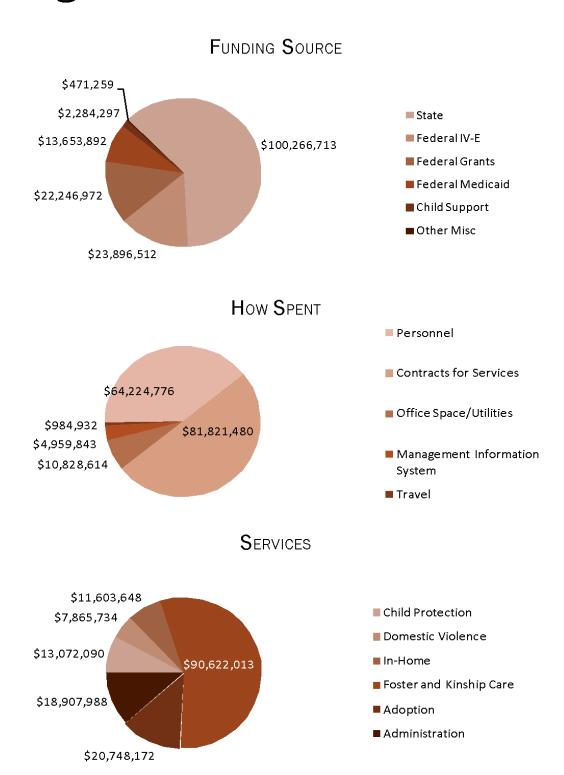
Child and Family Services caseworkers encounter families from many different ethnic backgrounds. One of the Practice Model Principles is to provide services that are culturally responsive, meaning that children and families are to be understood within the context of their own family rules,

traditions, history, and culture. It is important for caseworkers to ask the family to share information that will help the caseworker understand the family's beliefs and values, and to respond with respect. The Indian Child Welfare Act is a federal statute passed in 1978 by Congress to protect Indian families and preserve the ties between Indian children and their tribes. Child and Family Services is legally obligated to follow these standards and the inherent value of keeping children connected with their past, present, and future. Children of color are disproportionally represented in foster care. Child and Family Services works to develop partnerships within the community to enhance our ability to provide culturally responsive services to families. Persons may be multiethnic and thus be represented in more than one category below. Child and Family Services is working with the University of Utah to devlop a study regarding disproportionality in our system.

ETHNICITY OF CLIENTS SERVED

	African American	American Indian/Alaska Native	Pacific Islander/Asian	Caucasian	Other/Unknown	Hispanic
Child Protective Services	4%	4%	3%	90%	1%	25%
In-Home Services	4%	4%	2%	89%	3%	19%
Foster Care	7%	6%	2%	88%	0%	25%
Adoption	7%	4%	1%	91%	0%	32%
State Population	1%	1%	3%	82%		12%

Funding



FY08 Flexible Funding \$2,579,525

Flexible funding refers to the portion of service dollars spent to provide unique services and resources to address essential individual client needs



Quality Improvement Committees

There are nine Quality Improvement Committees across the state of Utah with another beginning soon in Moab. The committees are made up of concerned citizens and community partners invested in the child welfare system. These committees serve a critical function providing an

outside perspective to the child welfare system. Based on data they review and other information they receive, committees make recommendations for improvements to the system. Examples of improvements made this year as a result of committee investigation include:

- reduced delays in licensing of foster care resource families
- improved services and communications with the substance abuse agency in Tooele
- increased consistency among Intake staff across the state.

Public Events:

One purpose of Quality Improvement Committees is to provide the public with information about the child welfare system. Many of the committees have hosted public events known as "Immersions" during the year. The Immersions are a look into a day in the life of Child and Family Services caseworkers. They often include a panel of clients who provide their view of the child welfare process, their feelings about the services they received, and a report on what they have achieved. These presentations are often filled with tender emotions that touch all in attendance. Immersion experiences allow the public to experience the complexities, frustrations, and enormous rewards of being a Child and Family Services caseworker.

Immersions held in 2008:

- January 2008 Providence with 15 Migrant Head Start workers
- February 2008 Spanish Fork with 20 Hispanic community members
- March 2008 Ogden with 65 attendees
- April 2008 Roosevelt with 94 attendees
- May 2008 Cedar City with 50 attendees
- May 2008 Salt Lake City with 40 attendees
- September 2008 Richfield with 35 attendees
- October 2008 Price with 45 Attendees
- October 2008 Ogden with 60 attendees

Employee recognition events:

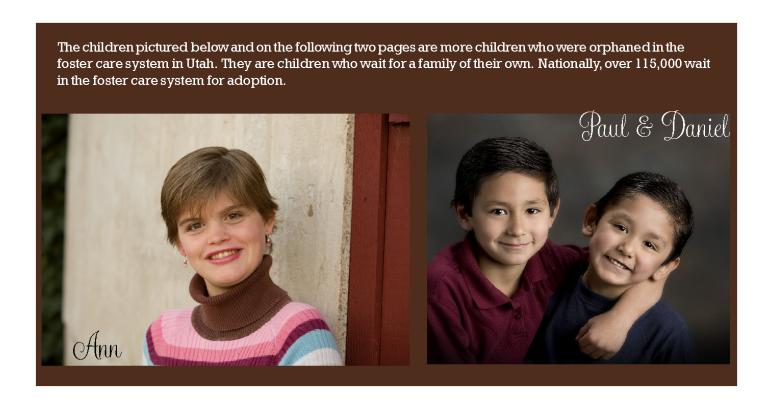
- The Ogden committee hosts a bi-annual event called "Stories of Hope"
- The Salt Lake committee hosts "Stories of Heart" biannually
- The Uintah Basin, Price, St. George, Manti, and Richfield Quality Improvement Committees host dinners for employees and their spouses in appreciation of the work they do
- The Cedar City committee recognized support staff efforts

Fetal Exposure training:

The State Quality Improvement Committee developed and provided training on fetal exposure to harmful substances. The goals of the training were to improve understanding of the health and developmental impacts that these substances have on newborns who were exposed in utero, to encourage consistency in the response by CPS, law enforcement, and prosecutors across the state, and finally, to emphasize the importance of early identification and treatment for drug involved mothers. The training has been offered in many parts of the state.

The Quality Improvement Committees continually seek to expand their membership. They are especially looking for people served by Child and Family Services such as foster parents and previous clients, both parents and children, to join their committees. There is also a need for members from different cultural and ethnic backgrounds. If you are interested in serving on a committee, please contact Kerri Burns at 801 538-4100.

The Quality Improvement Committees' website can be found at www.utahqic.utah.gov.

















Vicholas (Kevin)





Featuring Utah's Heart Gallery "Children who wait"